Arizona State Board of Nursing

SCHOOL NURSE RENEWAL INSTRUCTIONS

OTHER FEES:

- All fees may be paid by check or money order and made payable to the Arizona State Board of Nursing.
- ALL PERSONAL CHECKS MUST BE PRE-PRINTED WITH YOUR NAME AND ADDRESS.
- All renewals that are returned to the Board because of an incorrect address will be fined \$5.00.
- There is a \$50.00 fee for all checks returned for insufficient funds.
- ALL FEES ARE NON REFUNDABLE.

<u>ADDRESS</u>: The <u>home/primary state of residence</u> address must be completed if your address is different than the printed address in the shaded box of page one. This address must reflect where you vote, pay taxes or obtain a drivers license. The <u>mailing</u> address is optional. A.R.S. § 32-3801 states that a professional's residential address and phone number maintained by a professional board are not available to the public unless that is the only address and number of record. If you give a mailing address, your renewal notice, Newsletter, etc., would be sent to your mailing address.

NAME CHANGE: Pursuant to R4-19-307, a licensee shall notify the Board, in writing, or any legal change in name within 30 days, and submit a copy of the official document verifying the name change (copy of a birth certificate, social security card, diploma from school showing your <u>previous</u> name and a copy of a divorce decree, driver's license or social security card showing new name).

FELONY CONVICTIONS: Pursuant to A.R.S. § 32-1606(B) (17), the Board shall revoke a nursing license or multistate privileges or deny licensure if the applicant has one or more felony convictions that have not previously been disclosed to the Board and has not received an absolute discharge from the sentences for all felony convictions five or more years prior to the date of filing an application. If this law pertains to you, your application will not be processed, and proceeding for revocation of your Arizona license or multistate privileges in Arizona or denial of your application shall be instituted by the Board.

REPORTING OF CRIMINAL CHARGES: Applications for licensure/certification must notify the board of criminal charges that may affect patient safety within 10 days of being charged. Further information is available on www.azbn.gov.

RENEWAL REQUIREMENTS: You must provide official, sealed transcripts or official documents verifying the educational requirements for the renewal level indicated on the front of the renewal application. If you have previously submitted documents that can be used to verify educational requirements for this renewal, you do not need to request or submit duplicate documents.

First Level

(Requirements for School Nurses whose last certification with the Board of Nursing was Initial certification)

Three semester hours in each:

- school nurse practice course
- physical assessment of the schoolaged child course
- nursing care of the child with developmental disabilities

<u>Initial Level and First Level</u> Certifications are good for three years.

Second Level

(Requirements for School Nurses whose last certification with the Board of Nursing was at the First level)

A Bachelor of Science Degree in Nursing

OR

Three semester hours in:

- community health theory
- · management theory
- either 3 semester hours of upper division or graduate credit in nursing or health related subjects from a regionally-accredited institution, or 45 hours continuing education related to nursing practice

Second Level certification is valid for six years.

Third Level

(Requirements for School Nurses whose last certification with the Board of Nursing was at the Second or Third level)

Six semester hours of:

 upper division or graduate credit in nursing or health related subjects from a regionally-accredited institution

<u>OR</u>

*Ninety contact hours of:

• continuing education related to nursing practice

<u>Third Level</u> certification is valid for six years.

Subsequent renewal is valid for six years.

<u>TIME FRAMES FOR LICENSING:</u> For the purposes of these time frames, the Board is required to process applications for renewal of licensure/certification within certain time periods. A.R.S. § 41-1073. The following definitions are provided to assist you in understanding time frames below:

• Administrative completeness time frame:

The number of days from receipt of an application until the Board determines that the application is complete.

• Substantive review time frame: The number of days following the administrative completeness time frame during which the

Board determines whether the applicant should be licensed.

• Deficiency notice: Correspondence from the Board notifying the applicant that the application is incomplete and

that information or is missing.

Time to respond: The table below specifies the number of days an applicant has to respond to a deficiency

notice.

• Comprehensive written request: A request by the Board to the applicant during the substantive review time frame for

additional information or documentation.

Time to respond: The table below specifies the number of days an applicant has to respond to a

comprehensive written request.

• Overall time period: The total number of days from the Board's receipt of an application until the Board

determines whether to grant licensure includes the administrative completeness time frame, the substantive review time frame, as well as time to respond to a deficiency notice and

comprehensive written request.

CERTIFICATION TIME FRAMES

Type of Certification	Applicable Rule	Overall Time	Administrative Completeness	Deficiency Notice (time for applicant to respond)	Substantive Review	Comprehensive Written Request (time to respond)
WITHOUT INVESTIGATION						
SCHOOL NURSE CERTIFICATION	R4-19-308	150 days	30 days	270 days	120 days	150 days
WITH INVESTIGATION						
SCHOOL NURSE CERTIFICATION	R4-19-308	270 days	30 days	270 days	240 days	150 days

For more information regarding the time frames for certification, consult A.A.C. R4-19-102. For assistance with the application process for certification, **contact Cris Oates at (602) 889-5205**. If you fail to respond to a deficiency notice or comprehensive written request within the applicable time periods, your application will be withdrawn. If you are still interested in obtaining certification, you must submit a new application and applicable fees.

RNs/LPNs SAVE YOURSELF TIME AND FRUSTRATION...

Check these areas **before** returning your application.

ALL BLANKS MUST BE COMPLETED, EXCEPT THOSE MARKED OPTIONAL

<u>GEN</u>	ERAL FOR ALL								
	Your application is in b Home Address/Primary pay federal taxes, or obt	Residenc tain a driv	er's license						
	for the <i>correct</i> fees made out to Arizona State Board of Nursing								
	you after we receive your application								
_	EXAMINATION APPLICANTS		ENDORSI APPLIC	EMEN	<u>T</u>		ED PRACTICE OR DOL NURSE		
APPLICANTS \$263 − Examination fee − includes Fingerprint fee. If you have submitted fingerprints within the past 2 years, you do not need to resubmit another set of fingerprints.		□ \$193 – Endorsement fee – includes Fingerprint fee (If requesting a Temporary license, add \$25 for license fee) □ Endorsement Applicants: If you are requesting temporary license, you enclosed a photocopy of current license which shows an expiration date. □ If a graduate of a foreign nursing program, have submitted a copy of a letter from CGFNS with ID number.			□ \$135 – Nurse Practitioner fee for each specialty listed on the application (Need fingerprint fee if no fingerprint card was submitted to the Board in the past 2 years.) □ \$100 – Prescribing & Dispensing Authority fee for initial application (Need fingerprint fee if no fingerprint card was submitted to the Board in the past 2 years.) □ \$100 – Clinical Nurse Specialist fee for initial application (Need fingerprint fee if no fingerprint card was submitted to the Board in the past 2 years.) □ \$50 – CRNA Prescribing fee for initial application (Need fingerprint fee if no fingerprint card was submitted to the Board in the past 2 years.) □ \$35 – School Nurse initial certification fee (Also need fingerprint fee if no fingerprint card was submitted to the Board in the past 2 years.)				
						certification fee	Nurse <u>renewal</u>		
	ABBREVIATIONS OF STATES & TERRITORIES						рини тее		
AL	ALABAMA		KEVIATIONS OF S. LINOIS	MT	MONTANA	RI RI	RHODE ISLAND		
AK AS AZ AR CA CO CT DC DE FL	ALASKA AM. SAMOA ARIZONA ARKANSAS CALIFORNIA COLORADO CONNECTICUT WASHINGTON DC DELAWARE FLORIDA	IN IN IN IA IO KS KAY KI LA LO ME M. MD M. MI MI MI MN MI MN	DIANA WA ANSAS ENTUCKY DUISIANA AINE ARYLAND ASSACHUSETTS ICHIGAN INNESOTA	NE NV NH NJ NM NY NC ND OH	NEBRASKA NEVADA NEWHAMPSHI NEW JERSEY NEW MEXICO NEW YORK NO. CAROLINA NO. DAKOTA OHIO OKLAHOMA	SC SD TN TX UT VT VI VI VA WA	SO. CAROLINA SO. DAKOTA TENNESSEE TEXAS UTAH VERMONT VIRGIN ISLANDS VIRGINIA WASHINGTON WEST VIRGINIA		
GA HI	GEORGIA HAWAII		ISSOURI) MARIANA IS	OR PA	OREGON PENNSYLVANI	WI MA WY	WISCONSIN WYOMING		

PUERTO RICO

MISSISSIPPI

IDAHO



ARIZONA STATE BOARD OF NURSING

RENEWAL APPLICATION FOR SCHOOL NURSE CERTIFICATION

	RENEWAL LEVEL] 3	
	RENEWAL DUE DATE	/ /		
	FEE: \$			
	CERTIFICATION #			
	CLATIFICATION ("			
PLEAS	SE PRINT YOUR INFORM	MATION IN ALL C	APITAL LETTERS	
		VIIIIOIV II VIIEE C		
	ANTS NAME (the name you are	currently certified with)		
Last	Name			
First	Name			M.I.
1.	SOCIAL SECURITY NUM	IBER	BIRTH DATE (month/	day/year) SEX (optional)
			/ /	Male Female
	BIRTH CITY		STATE COUNTRY	(ex. USA)
2.	DO YOU HAVE A NEW N	AME? No [Yes If yes, fill in you	r new name. (Documentation is required)
	Last Name			
	First Name			M.I.
	This ivalie			IVI.I.
3.	HOME ADDRESS/PRIMA Street Address Line 1	RY STATE OF RESIDE	NCE (where you vote,	pay federal taxes, obtain a drivers license)
	Street Address Line 2	Count	y of Residence	
	City			State Zip Code
4.	MAILING ADDRESS	(If different than Hom	ne Address)	
	Street Address Line 1			
	Street Address Line 2			
	City			State Zip Code
5.	HOME PHONE		CELL PHONE	
] -	()	
	· / / /			
	OFFICE	USE ONLY		CND A
•	NURSYS Results	s: Neg Pos	Initials	SNRA





DISCIPLINARY QUESTIONS



Before answering the next question read the following: The fact that a conviction has been pardoned, expunged, dismissed, deferred, reclassified, redesignated or that your civil rights have been restored, does not mean that you answer this question "no"; you would have to answer "yes" and give details on each conviction.

	Applicant's Signature	Date
suppressed any information that the laws and rules of the Arizon false information or disclosure	na Board of Nursing; that he/she has read and understands that of misleading information may constitute fraud and may result against an issued license or certificate. Failure to disclose the	ical standards of conduct in the profession of nursing and obey failure to disclose the requested information or disclosure of in denial of licensure/certification or disciplinary action, up to
	<u>Verification by Oath or Af</u>	<u>firmation</u>
PLEASE BE	ADVISED THAT FAILURE TO PROVIDE THE REC PROCESSING OF YOUR A	
□ No □ Yes	If yes, include a detailed explanation and a copy of the pending disciplinary action with your application.	paperwork regarding the current investigation or
	nder investigation or is disciplinary action pending against yould in any state or territory of the Untied States?	r nursing license, certification or any other license or
□ No □ Yes	If yes, provide a written explanation of the details of and court documents for each conviction indicating ty	each conviction and sentence. Return the written explanation pe of conviction, conviction date and sentence.
2. Since your last renewa	al, have you had any drug or alcohol related convictions?	
□ No □ Yes	a copy of the police report and court documents for ea	each conviction and sentence. Return the written explanation, ch conviction indicating type of conviction, conviction date, of the sentence for each felony conviction with your application.
contest, or have you b undesignated offence	een sentenced, served time in jail or prison, or had prosecution?	deferred or sentence deferred or probation deferred in any felony or

PLI do not submit the application 2-3 weeks prior to the expiration date. If this application is not postmarked by midnight of the date of expiration, your School Nurse Certification is expired. The postmark does not mean that your license has been updated in our system. If your application is not completely filled out or if the fee is incorrect, it will be returned to you and further delay the renewal process.

> RETURN TO: ARIZONA STATE BOARD OF NURSING

4747 N. 7TH STREET, SUITE 200 PHOENIX, AZ 85014-3653

(602) 889-5150

Our Website: www.azboardofnursing.com



Effective January 1, 2008, based on Federal and State Laws, all applicants must provide evidence of citizenship or nationality.

Federal law, 8 U.S.C. § 1641, and a state law, A.R.S. § 1-501, require documentation of citizenship or nationality for licensure. If the documentation does not demonstrate that the applicant is a United States citizen, national, or a person described in specific categories, the applicant will not be eligible for licensure in Arizona.

If the Board has received your application after 1/1/08, and the application did not ask you a question about citizenship, you will be required to complete a form and submit documentation evidencing citizenship or nationality prior to receiving your license/certification.

ARIZONA STATE BOARD OF NURSING ARIZONA STATEMENT OF CITIZENSHIP AND ALIEN STATUS

Directions: All applicants must complete Sections I, II, and IV. Applicants who are <u>not</u> U.S. citizens or nationals must also complete Section III. Submit this completed form and copy of one or more documents that evidence your citizenship or alien status with your application for license or renewal.

	SECTION I - APPLI	CANT INFORM	<u>IATION</u>	
Applicant's Name (Print or type)			Date:	
Type of Application (check one)	☐ Initial Application	Renewal		
Type of License/Certification:	☐ RN ☐ LPN	☐ CNA	☐ AP ☐ CRNA	□ SN
SECTION	II – CITIZENSHIP OR N	NATIONAL STA	ATUS DECLARATION	
Directions: Attach a legible copy of demonstrates U.S. citizenship or n		y), of a document	from the attached List A	or other document that
Name of document provided:			<u></u>	
Are you a citizen or national of the	e United States? (Check or	ne) Y	ES NO	
If the answer is "YES", where were	re you born? List city, stat	e (or equivalent),	and country/territory.	
City:	State (or equivalent):		Country/Terri	itory:
If you are a citizen or national of t complete Sections III and IV.	he United States, go to Sec	ction IV. If you a	re <u>not</u> a citizen or national	of the United States, please
	SECTION III – ALIEN	STATUS DECI	LARATION	
Directions: To be completed by a checking the appropriate box. Att document that evidences your stat	ach a legible copy of the <u>f</u> 1			
Name of document provided:				
F. An alien granted condition G. An alien who is a Cuban	ed for permanent residence asylum under Section 208 of United States under section United States for at least con is being withheld under onal entry under Section 20 and Haitian entrant (as def	under the Immig of the INA. on 207 of the INA one year under Se Section 243 (h) of (3 (a) (7) of the IN ined in section 50	A. ction 212 (d) (5) of the INA of the INA. NA as in effect prior to Api	A. ril 1, 1980. ation Assistance Act of 1980)
			C. § 1101 <i>et seq</i> .] Nonimm	nigrant is persons who
Alien Paroled into the United St J. An alien paroled into the			521 (a) (3)) ection 212 (d) (5) of the IN	JA

Other I	er Persons (8 U.S.C. § 1621 (c) (2) (A) and (C))		
■ K.	K. A nonimmigrant whose visa for entry is related to employment in	the United States, or	
L.	L. A citizen of a freely associated state, if section 141 of the applicab	ble compact of free association approved in Public Lav	V
	99-239 or 99-658 (or a successor provision) is in effect [Freely As	ssociated States include the Republic of the Marshall	
	Islands, republic of Palau and the Federate States of Micronesia, 4	48 U.S.C. § 1901 et seq.];	
☐ M.	M. A foreign national not physically present in the United States.		
Otherv	erwise Lawfully Present (A.R.S. § 1-501)		
□ N.	N. A person not described in categories 1-13 who is otherwise lawful	lly present in the United States.	
	PLEASE NOTE: The federal Personal Responsibility and Wo	ork Opportunity Reconciliation Act may make perso	on
	who fall into this category ineligible for licensure. See 8 U.S.C	C. § 1621 9a).	
	SECTION IV - DECLARAT	ΓΙΟΝ	
	applicants must complete this section. I declare under penalty of perve given are true and correct to the best of my knowledge.	jury under the laws of the State of Arizona that the ans	wers
APPLIC	PLICANT'S SIGNATURE	TODAY'S DATE	

Attachment: Lists A and B Evidence of U.S. Citizenship, U.S. National Status, or Alien Status

REMINDER:
DON'T FORGET TO
ENCLOSE COPY
OF DOCUMENTATION

ARIZONA STATEMENT OF CITIZENSHIP & ALIEN STATUS

All applicants must answer questions on the application regarding citizenship. A copy of a document that shows evidence of your citizenship or alien status <u>MUST BE</u> submitted with your application for licensure or renewal. See List A or List B.

LIST A

Evidence showing U.S. citizen or U.S. national status includes the following:

a. Primary Evidence:

- (1) A birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);
- (2) United States passport;
- (3) Report of birth abroad of a U.S. citizen (FS-240) (issued by the Department of State to U.S. citizens);
- (4) Certificate of Birth (FS-545) (issued by a foreign service post) or Certification of Report of Birth (DS-1350), copies of which are available from the Department of State;
- (5) Form N-550 or N-570, Certificate of Naturalization (issued by the Service through a Federal or State court, or through administrative naturalization after December 1990 to individuals who are individually naturalized; the N-570 is a replacement certificate issued when the N-550 has been lost or mutilated or the individual's name has changed);
- (6) Form N-561, Certificate of Citizenship;
- (7) Form I-197, United States Citizen Identification Card (issued by the Service until April 7, 1983 to U.S. citizens living near the Canadian or Mexican border who needed it for frequent border crossings) (formerly Form I-179, last issued in February 1974);
- (8) Form I-873 (or prior versions), Northern Marianas Card (issued by the Service to a collectively naturalized U.S. citizen who was born in the Northern Mariana Islands before November 3, 1986);
- (9) Statement provided by a U.S. consular official certifying that the individual is a U.S. citizen (given to an individual born outside the United states who derives citizenship through a parent but does not have a FS-240, FS-545, or DS-1350); or
- (10) Form I-872 (or prior versions), American Indian Card with a classification code "KIC" and a statement on the back identifying the bearer as a U.S. citizen (issued by the Service to U.S. citizen members of the Texas Band of Kickapoos living near the U.S./Mexican border).

b. Secondary Evidence

If the applicant cannot present one of the documents listed in (a) above, the following may be relied upon to establish U.S. citizenship or U.S. national status;

- (1) Religious record recorded in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction) within three 3 months after birth showing that the birth occurred in such jurisdiction and the date of birth or the individual's age at the time the record was made;
- (2) Evidence of civil service employment by the U.S. government before June 1, 1976;
- (3) Early school records (preferably from the first school) showing the date of admission to the school, the applicant's date and U.S. place of birth, and the name(s) and place(s) of birth of the applicant's parent(s);
- (4) Census record showing name, U.S. nationality or a U.S. place of birth, and applicant's date of birth or age;
- (5) Adoption finalization papers showing the applicant's name and place of birth in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917, American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Marian Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction), or, when the adoption is not finalized and the state or other U.S. jurisdiction listed above will not release a birth certificate prior to final adoption, a statement from a state or jurisdiction approved adoption agency showing the applicant's name and place of birth in one of such jurisdictions, and stating that the source of the information is an original birth certificate;
- (6) Any other document that establishes a U.S. place of birth or otherwise indicates U.S. nationality (e.g., a contemporaneous hospital record of birth in that hospital in one of the 50 states, the District of Columbia, Puerto Rico (on or after January 13, 1941), Guam, the U.S. Virgin Islands (on or after January 17, 1917), American Samoa, or the Northern Mariana Islands (on or after November 4, 1986, Northern Mariana Islands local time) (unless the applicant was born to foreign diplomats residing in such a jurisdiction);

c. Collective Naturalization

If the applicant cannot present one of the documents listed in (a) or (b) above, the following will establish U.S. citizenship for collectively naturalized individuals:

Puerto Rico:

• Evidence of birth in Puerto Rico on or after April 11, 1899 and the applicant's statement that he or she was residing in the U.S., a U.S. possession or Puerto Rico on January 13, 1941; or

• Evidence that the applicant was a Puerto Rican citizen and the applicant's statement that he or she was residing in Puerto Rico on March 1, 1917 and that he or she did not take an oath of allegiance to Spain.

U.S. Virgin Islands:

- Evidence of birth in the U.S. Virgin Islands, and the applicant's statement of residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927;
- The applicant's statement indicating resident in the U.S. Virgin Islands as a Danish citizen on January 17, 1917 and residence in the U.S., a U.S. possession or the U.S. Virgin Islands on February 25, 1927, and that he or she did not make a declaration to maintain Danish citizenship; or
- Evidence of birth in the U.S. Virgin Islands and the applicant's statement indicating residence in the U.S., a U.S. possession or territory or the Canal Zone on June 28, 1932.

Northern Mariana Islands (NMI) (formerly part of the Trust Territory of the Pacific Islands (TTPI)):

- Evidence of birth in the NMI, TTPI citizenship and residence in the NMI, the U.S., or a U.S. territory or possession on November 3, 1986 (NMI local time) and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time);
- Evidence of TTPI citizenship, continuous residence in the NMI since before November 3, 1981 (NMI local time), voter registration prior to January 1, 1975 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4, 1986 (NMI local time); or
- Evidence of continuous domicile in the NMI since before January 1, 1974 and the applicant's statement that he or she did not owe allegiance to a foreign state on November 4 1986 (NMI local time). Note: If a person entered the NMI as a nonimmigrant and lived in the NMI since January 1, 1974, this does not constitute continuous domicile and the individual is not a U.S. citizen

d. Derivative Citizenship

If the applicant cannot present one of the documents listed in a or b above, the following may be used to make determination of derivative U.S. citizenship:

Applicant born abroad to two U.S. citizen parents: Evidence of the U.S. citizenship of the parents and the relationship of the applicant to the parents, and evidence that at least one parent resided in the U.S. or an outlying passion prior to the applicant's birth. Applicant born abroad to a U.S. citizen parent and a U.S. non-citizen national parent: Evidence that one parent is a U.S. citizen and that the other is a U.S. non-citizen national, evidence of the relationship of the applicant to the U.S. citizen parent, and evidence that the U.S. citizen parent resided in the U.S., a U.S. possession, American Samoa or Swain's Island for a period of at least one year prior to the applicant's birth.

Applicant born out of wedlock abroad to a U.S. citizen mother: Evidence of the U.S. citizenship of the mother, evidence of the relationship to the applicant and, for births on or before December 24, 1952, evidence that the mother resided in the U.S. prior to the applicant's birth or, for births after December 24, 1952, evidence that the mother had resided, prior to the child's birth, in the U.S. or a U.S. possession for a period of one year.

Applicant born in the Canal Zone or the Republic of Panama:

- A birth certificate showing birth in the Canal Zone on or after February 26, 1904 and before October 1, 1979 and evidence that one parent was a U.S. citizen at the time of the applicant's birth; or
- A birth certificate showing birth in the Republic of Panama on or after February 26, 1904 and before October 1, 1979 and evidence that at least one parent was a U.S. citizen and employed by the U.S. government or the Panama Railroad Company or its successor in title.

In all other situations in which an applicant claims to have a U.S. citizen parent and an alien parent, or claims to fall within one of the above categories, but is unable to present the listed documentation:

- If the applicant is in the U.S., the applicant should contact the local U.S. Citizenship and Immigration Service office for determination of U.S. citizenship;
- If the applicant is outside the U.S., the applicant should contact the State Department for a U.S. citizenship determination.

e. Adoption of Foreign-Born Child by U.S. Citizen

- If the birth certificate shows a foreign place of birth and the applicant cannot be determined to be a naturalized citizen under any of the above criteria, obtain other evidence of U.S. citizenship;
- Because foreign-born adopted children do not automatically acquire U.S. citizenship by virtue of adoption by U.S. citizens, the applicant should contact the local U.S. Citizenship and Immigration Service office for a determination of U.S. citizenship, if the applicant provides no evidence of U.S. citizenship.

f. U.S. Citizenship By Marriage

A woman acquired U.S. citizenship through marriage to a U.S. citizen before September 22, 1922. Provide evidence of U.S. citizenship of the husband, and evidence showing the marriage occurred before September 22, 1922.

Note: If the husband was an alien at the time of the marriage, and became naturalized before September 22, 1922, the wife also acquired naturalized citizenship. If the marriage terminated, the wife maintained her U.S. citizenship if she was residing in the U.S. at that time and continued to reside in the U.S.

LIST B

Qualified Aliens, Nonimmigrant, and aliens paroled into U.S. for less than one year.

a. "Qualified Aliens"

Evidence of "Qualified Alien" status includes the following:

Alien Lawfully admitted for Permanent Residence

- *Form I-551 (Alien Registration Receipt Card, commonly known as a "green card"); or
- Unexpired Temporary I-551 stamp in foreign passport or on *I Form I-94.

Asvlee

- *Form I-94 annotated with stamp showing grant of asylum under section 208 of the INA;
- *Form I-688B (Employment Authorization Card) annotated "274a.12 (a) (5)";
- *Form I-766 (Employment Authorization Document) annotated "A5";
- Grant letter from the Asylum Office of the U.S. Citizenship and immigration Service; or
- Order of an immigration judge granting asylum.

Refugee

- *Form I-94 annotated with stamp showing admission under § 207 of the INA;
- *Form I-688B (Employment Authorization Card) annotated "274a.12 (a) (3)";
- *Form I-766 (Employment Authorization Document) annotated "A5";

Alien Paroled Into the U.S. for at Least One Year

- *Form I-94 with stamp showing admission for at least one year under section 212(d) (5) of the INA. (Applicant cannot aggregate periods of admission for less than one year to meet the one-year requirement.

Alien Whose Deportation or Removal was withheld

- *Form I-688B (Employment Authorization Card) annotated "274a.12 (a) (10)";
- *Form I-766 (Employment Authorization Document) annotated "A10"; or
- Order from an immigration judge showing deportation withheld under §243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under §241 (b) (3) of the INA.

Alien Granted Conditional Entry

- *Form I-94 with stamp showing admission under §203 (a) (7) of the INA;
- *Form I-688B (Employment Authorization Card) annotated "274a.12 (a) (3)"; or
- *Form I-766 (Employment Authorization Document) annotated "A3".

Cuban/Haitian Entrant

- *Form I-551 (Alien Registration Receipt Card, commonly known as a "green Card") with the code CU6, CU7, or CH6
- Unexpired temporary I-551 stamp in foreign passport or on *Form I-94 with the Code CU6 or CU7; or
- *Form I-94 with stamp showing parole as "Cuba/Haitian Entrant" under Section 212 (d) (5) of the INA.

Alien who has been Declared a Battered Alien or Alien Subjected to Extreme Cruelty

- U.S. Citizenship and Immigration Service petition and supporting documentation

b. Nonimmigrant

Evidence of "Nonimmigrant" status includes the following:

- *Form I-94 with stamp showing authorized admission as nonimmigrant

c. Alien Paroled into U.S. for less than One year

- *Form I-94 with stamp showing admission for less than one year under section 212 (d) (5) of the INA